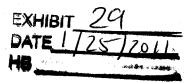
1/20/2011



Kay Brown 565 Burton St. Apt 105 Missoula, MT 59802

Dear Legislative Finance Committee,

I am deeply concerned about further cuts to personal assistance services. Slashing meal prep hours to a maximum of four per week will make it very difficult to meet my nutritional needs. My kidney dialysis makes it necessary for me to avoid salt and other preservatives found in fast food and microwave meals. I fear that a reduction in meal prep time will hinder my caregiver's ability to prepare fresh, healthy meals. 240 minutes per week divides this way:

Three meals per day = 11.4 minutes per meal

Two meals per day = 17.1 minutes per meal

One meal per day = 34.3 minutes per meal

I challenge anyone on the committee to consistently prepare nutritional meals with these time constraints.

Also, I believe that a cutback in hours will lead to less quality caregivers. Fewer hours to go around may result in more talented personal care attendants looking for other jobs. This is counterproductive since fewer hours require workers who can multitask. Less motivated caregivers struggle with multitasking. These cuts may be numbers to you, but they will have a negative effect on my quality of life. More cuts are a mistake. Thank you for your time.

Sincerely,

Kay Brown

To: Members of the Joint Appropriations Subcommittee of Health & Human Services Committee

From: Lori Henderson, RN, Northern Montana Care Center Administrator

& family member

Date: January 23, 2011

Re: Funding for LTC

I am a nurse, nursing home administrator, and a daughter of a parent who lives in a long term care facility. I am writing to urge you to restore and appropriate funding for long term care facilities. Last summer when the 2% State budget cuts were made, I had no choice but to eliminate administrative, ancillary, and nursing staff. As a result of the staff cuts, I also limited admissions. To continue to admit residents when I didn't have safe staff ratios, would have risked quality of care and create staff burnout.

Nursing homes are no longer the end of the road for our elderly. They have become modern well-equipped facilities with trained and dedicated professionals that are now caring for very ill and/or injured young and old. I can relate to this transition both professionally and personally. My father has been very ill this year. He's had two events that required hospitalization and subsequent long term care rehabilitation. As a professional, I can tell you that without the option of transferring to a nursing home with nurses, CNAs, social workers, and therapists who were aided bymodern equipment and programs, he never would have been able to return home or even survived. As I write this, he is soon planning to be home for a second time. The staffs have provided my mother and him with extensive physical, psychological, and social assistance. As a family member, I am so thankful for the care that these dedicated individuals have given to my parents and siblings. We absolutely couldn't have done it without the nursing home teams.

From the professional standpoint, I know that if you do not reinstate our 2% increase and provide the future appropriate funding we need to stay abreast of the cost of doing business; nursing homes will not be able to meet the needs of our changing populations.

Sixty to seventy percent of the residents in my facility are Medicaid. I do not have a profit center to offset any further cuts. You must recognize that we lose money on every Medicaid resident. The 2% increase does not yield higher profit, only smaller loss.

During the 2009 legislative budget, Legislators appropriated necessary funds only to see them vanish when the legislature was not in session. I fervently hope that this Committee builds in safeguards to ensure that long term care budgets do not become political boomerangs for this next biennium.

Thank you for listening.